

FOR INSTRUCTIONS, SEE BACK OF FORM

This form is not applicable to statutory political committees.

Notice of Dissolution

Every Notice of Dissolution shall be accompanied by a completed Disclosure Report Form current to the date of dissolution.

COMMITTEE NAME

Official Name of Committee	
<u>Elect Susan deBuhr Committee</u>	
Street	
<u>1434 Starbeck Circle</u>	
City, State, Zip Code	
<u>Cedar Falls, Iowa 50613</u>	
Area Code	Telephone
<u>(319) 277 8974</u>	

Effective date of dissolution:

1-2-04, 18 2004

Susan deBuhr
Signature of Treasurer

Susan deBuhr
Date Signed

JAN 9 2004

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

I, the candidate, certify that my candidate committee's cash balance is zero, all debts, obligations and loans have been paid or satisfied in accordance with law as shown on my committee's final report and all campaign property and leftover funds have been distributed in accordance with my committee's last filed Statement of Organization.

Susan deBuhr

Signature of Candidate - Required for Candidate's Committee

1-10-04

Date signed

WHEN TO FILE:

The Notice of Dissolution must be filed within thirty (30) days of the committee's dissolution, with a copy of the final bank statement attached.